

POLITICAL INQUIRY FORM WCBS/WLNY- New York CANDIDATE

SPI	ECIAL () PRIMARY (x)	GENERAL ()	OUT OF WINDOW ()
Wii	ndow Dates: 4/8-6/6/17	Name of Requestor: Kate Welsh	Date of Request: 5/8/2017
 2. 	AGENCY NAME, ADDRESS & PHONE CANDIDATE'S AUTHORIZED COMMITTEE NAME, ADDRESS, PHONE & TREASURER	Buying Time 650 Massahcusettts Ave NW, Suite 210 Washington,DC 20001 202-965-5060 Wisniewski for Governor 2909 Washington RD ste 40 Parlin NJ 08859 732-525-1400	Agency Contact: Kate Welsh Treasurer's Name: Vera Fozman
3.	ORGANIZATION FURNISHING TAPES: S	ee Line 1	
4.	CANDIDATE'S NAME: John Wisniewski CANDIDATE SEEKING OFFICE OF: New Third POLITICAL PARTY (if applicable): Democr	s is a STATE office	
5.	NATURE OF REQUEST: Request For CANDIDATE Card Requesting Political Rate Card All Dayp	arts, All Programs, All Levels Rates :30s	x
6.	DISPOSITION MADE OF REQUEST: a) Granted b) Avails Offered c) Rejected	- -	X X X
7.	SUBSEQUENT DEVELOPMENTS/AMOU	NT OF CHARGES: SEE FILE	
8.	REBATES Order # Date An	<u>nount</u>	
		CBS EMPLOYEE COM	PLETING FORM

Kerry Murphy , CBS Television Stations, 5/8/17